Form 00/1 (July 2000)	Notice of Section 527 Status		OMB No. 1545-1 <del>6</del> 93	
Oppartment of the Treasury Internal Revenue Service			OMB NO. 15-15-1686	
Part I General Inform	ation	****		
1 Name of organization		Em	ployer identification number	
Glacier PAC Nonfeder Mailing address (P.O. Box	<b>al</b> or number, street, and room or suite	e number	52 2255679	
818 Connecticut Aven		e Humbery		
City or town, state, and ZII Washington, DC 20006				
3 E-mall address of organiza				
N/A				
4a Name of custodian of reco		4b Custodian's address		
William C. Oldakor		818 Connecticut Avenue, NW Suite 1100		
William Of Oldanol	<b>W</b>	ashington, DC 20006		
5a Name of contact person	<b>5b</b> Co	ntact person's address	7	
	.s.	ame As Above	***************************************	
Same As Above				
6 Business address of organ	ization (if different from mailing add	ross shown above). Number, street, and room	or suite number	
City or town, state, and ZII	r code			
Part II Purpose	1			
7 Describe the purpose of the organization		RECEIVED IN CORRES		
Poltical Action Commi	ttee	IRS - O	SC / 607	
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Part III List of All Rela	ated Entities (see instructions  8b Relationship	8c Address		
oo manie or related entity	on Versiousuib	- V.17 (		
		818 Connecticut Avenue, NW Suite		
Glacier PAC	Connected			

9a Name	9b Title	ly Compensated Employees (see instructions) 9c Address	
William C. Oldaker	Treasurer	818 Connecticut Avenue, NW Suite 1100	
		Washington, DC 20006	
	5.4		
	1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2		